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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/716,064	
	Filing Date	11/17/2003	
	First Named Inventor	Michel GONDOUIN	
	Art Unit	3672	
	Examiner Name	Daniel P. Stephenson	
Total Number of Pages in This Submission	33	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
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<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Copy of Reference (5)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	Claims 66-70 (Method)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	Claims 43-50, 54
<input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>Remarks</b> - 24 Pages of Claims 43-50, 54-65 for an apparatus and Claims 66-70 for a Method.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	- Copy of Reference (5): SPE 21779 of from which Drawing 1C of Prior Art <sup>1992</sup> was copied (see FIG 11), P.216 of SPE paper	
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	Michael GONDOUIN, a.k.a. Michel GONDOUIN	
Signature		
Date	03/14/06	

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